

**BANNOCK COUNTY DRUG/DUI COURT PARTICIPANT AGREEMENT**

NAME: \_\_\_\_\_  
Last Middle First

ADDRESS: \_\_\_\_\_  
Street Apt.# City State Zip

PHONE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ CR- \_\_\_\_\_

*I understand, in order to be accepted into the Bannock County Drug or DUI Court Program, I must agree to certain terms and conditions. The following are the terms and conditions to which I hereby expressly agree:*

1. I agree that should I be terminated from the Drug/DUI Court Program, **I will be sentenced for the charge to which I have pled guilty and will not have the opportunity to withdraw my guilty plea.** I understand that if I enter the program as a Felony Drug/DUI I will be remanded back to District Court for disposition if terminated from the program.
2. **I understand that I am waiving any and all constitutional rights to appeal any sanctions imposed during the program and termination from the program.** I understand that I will not have an opportunity to be heard and present evidence an opportunity to confront and cross-examine witnesses and/or receive a written statement of the reasons for the sanctions and/or termination.
3. I agree to sign a consent form waiving confidentiality to any medical, treatment, or social services record. I understand that any withdrawal of consent will result in automatic termination.
4. I agree to fully participate in treatment and all other programs to which I am referred by the Drug/DUI Court, my case manager and/or my drug and alcohol treatment provider which will help me maintain my sobriety and a law-abiding lifestyle.
5. I understand that participation in the Drug/DUI Court involves a minimum time commitment of twelve (24) months. I understand that the Court may extend the program to allow me additional time to successfully complete my program requirements.
7. I agree to participate in alcohol or other drug treatment as directed by the Court, including but not limited to twelve (12) step support groups as set forth in my treatment plan.
8. I understand that my individual course of treatment may include, but are not limited to residential treatment, education, and/or self-improvement courses such as anger management, parenting, financial management or relationship counseling.

9. I agree to be supervised by the Drug/DUI Court treatment services supervisor and case manager through the Dept. of Corrections and or the Misdemeanor Probation department. I understand that I must attend all scheduled sessions and appointments made by the staff, case manager and/or treatment supervisor. If it is necessary to miss any sessions, I will notify the clinic or case manager prior to missing the appointment to obtain approval and to reschedule. I will bring typed letterhead documentation from my employer, doctor or other to verify my reason for missing the appointment. If I fail to call or bring verification to my next scheduled session, it will be considered an un-excused absence, which may involve a sanction. Each absence, whether excused or not, will be included in the status report sent to the Drug/DUI Court Judge and team members.
10. I agree I will be on time for all treatment, substance abuse testing, meetings, court dates and other scheduled appointments.
11. I agree to have no further violations of the law. Any additional charges or citations may result in sanctions and/or terminations from the Bannock County Drug/DUI Court.
12. I understand that sanctions may include, but are not limited to, time in custody, SCILD, increased treatment, increased testing, community service, extended stay in a phase and such other sanctions as may be deemed appropriate by the Bannock County Drug/DUI Court.
13. I agree to pay all court ordered obligations, which may include but are not limited to fines, fees, restitution, testing expenses and child support, as directed by the Court.
14. I enter the Drug/DUI Court program under a felony or misdemeanor DUI and I agree to pay \$125.00 per month for the duration of the program at a minimum of 24 months, and for every additional month I am in the Drug/DUI Court.
15. I agree to submit to frequent and random drug and alcohol tests of my blood, breath, hair, sweat and/or urine. I understand and agree that the Court may generally rely on the chemical test results. I understand that a positive result is presumed accurate; however, I may request a further confirming test if I test positive, but will do so at my own expense. I may be required to submit to an additional test of my urine and/or wear a drug detection patch at my own expense. I will be given a location and time to report for my drug test. I understand that it is my responsibility to report to the assigned location at the times allotted for the test.
16. I agree that any attempt to falsify urine tests or any other tests to detect substances will be considered a violation of my Drug/DUI Court contract and may result in a sanction. I understand that a missed test, a refusal, an altered, or failure to provide a sample will be considered a positive test and will be subject to the same sanctions as a positive test.
17. I agree to be responsible for what goes into my body that may affect drug/alcohol test results. Before taking medication of any kind, I will check to ensure that it is non-narcotic, non-benzodiazepine, non-addictive and contains no alcohol. I will not consume any foods or products which may contain poppy seeds, marijuana, alcohol or any other substances that could result in a positive test result.
18. I agree that I will not use, possess, or associate with persons who use or possess alcohol or any controlled substance or be present when alcohol or drugs are being consumed or used. I understand that I am responsible for informing and providing documentation for any and all

prescription medications I am taking including any changes to my prescriptions. I am also responsible for notifying the Drug/DUI Court staff of any and all over-the-counter medications that I am taking.

19. I will inform all treating physicians that I am a Drug/DUI Court participant and recovering from an addiction and may not take benzodiazepines, narcotics or addictive medications or drugs. If a treating physician wishes to treat me with benzodiazepines, narcotics or addictive medications or drugs, I will have that treating physician provide written documentation that I have informed him/her that I am in Drug/DUI Court, but that there are no alternatives. I agree if I am prescribed anything from a physician that I will provide a written standard form "Doctors Note" to the Drug/DUI Court team with the treating physicians signature.
20. I agree that I shall not frequent any establishment where the primary source of income is through the sale of alcohol, which includes bars that serve food. If I frequent a restaurant which also has a bar, I understand that I am not allowed to be on the bar side.
21. I understand that I may not work as a confidential informant with any law enforcement agency while I am in Drug/DUI Court, nor may I be made or encouraged to work as a confidential informant as a condition of my full participation in the Drug/DUI Court program.
22. I agree that failure to fully participate, failure to appear, positive urine tests, or other program failures may result in a sanction, which has been explained in the Drug/DUI Court Handbook.
23. I agree that a failure to appear for Drug/DUI Court or any other breach of this agreement may result in a bench warrant.
24. I understand that I may not change my address and/or phone number without prior permission of the Drug/DUI Court.
25. I agree that I will seek and maintain employment, or an educational or vocational program approved by the Drug/DUI Court staff and shall not change employment or program without first obtaining permission of the staff.
26. I agree and consent to search of my person, personal properties, automobiles and residence without a search warrant at any time and at any place by my case manager and/or any police officer and waive my constitutional right to be free from such searches.
27. I agree that I shall not purchase, conceal carry or have in my possession any firearm, ammunition, explosives and/or other weapons unless approved by my case manager and the Drug/DUI Court team. Firearms, weapons, ammunition, explosives or any other contraband seized will be forfeited to local law enforcement agencies for disposal.
28. I agree that I will not leave Bannock County without prior permission of my case manager.
29. I agree that I will be represented by the Bannock County Public Defender's office during the time I am in the Drug/DUI Court program. I understand that I am waiving my right to have a private attorney while I am in the Drug/DUI Court program. My attorney has advised me, AND I understand that the Public Defender assigned to the Drug/DUI Court operates in a non-traditional role. I understand the Public Defender represents me and works as part of the Drug/DUI Court staff in trying to decide what would best assist my recovery, including both

incentives and sanctions. He will not be required to specifically follow my directions as to how to proceed at any given hearing. I understand that the Public Defender assigned to the Drug/DUI Court Program may have potential conflicts, such as there may be Co-Defendants in the program. I understand that in order to enter the Drug/DUI Court program, I am waiving those potential conflicts as the program focuses on assisting in my recovery rather than challenging the underlying criminal charge.

- 30. I understand that if I am found to have been using alcohol/drugs prior to or when I arrive for treatment, counseling, court, etc., I will not be allowed to participate. I agree to surrender my car keys to the person conducting the session or I will call someone who is not under the influence to drive me home. I further understand that if I insist on driving law enforcement will be notified with a description of the vehicle.
- 31. I have thoroughly reviewed this form with my attorney.
- 32. I have read and understand all of the above statements and all of my questions have been answered.
- 33. I am requesting admission in the Bannock County Drug/DUI Court.
- 34. I agree to special conditions as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

\_\_\_\_\_  
DEFENDANT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DEFENDANT'S ATTORNEY

\_\_\_\_\_  
DATE